Informed consent in Turkey

SIR

The contemporary changes in the Hippocratic ethical tradition are parallel to the changes in the values of the Western world. The medical ethics view accepted by Anglo-America has been becoming dominant throughout the world. The reason for this, no doubt, is the scientific, technological and economical superiority of the Western world.

Nevertheless there are various kinds of philosophical and religious structures in the world. The reflection of the diversity in the values of the individual and social values in medical ethics is inevitable. In fact this topic should be discussed in all its aspects. In addition to this, it is obvious that there may be some other problems in different countries and regions of the world, in the field of medical ethics. It can be claimed that one of these, which springs from misunderstandings between physicians and patients,

is also a serious problem for the Western world. It must be one of the reasons why "informed consent" can be a problem. However, it can be said that in countries like Turkey this problem of informed consent, and of poor communications between physician and patient is more serious and more urgent.

Medical terminology in Turkey consists almost entirely of foreign words. Western-style modern education in the Ottoman Empire, which was started in 1839, was conducted in French. The return to education in Turkish and attempts to use the Turkish language in every area of life, during the period of the Turkish Republic, have not been reflected in the field of medicine. Latin medical terms weren't changed. In the 20th century, however, the developments in science and technology have led to a wider use of English in medical terminology.

The relationship between physician and patient is inevitably affected by language concepts in Turkey. Informed consent is being badly

affected. It is difficult for a Turkish patient to comprehend information in which a foreign language predominates. No matter how hard a physician tries to inform the patient by using Turkish words, eventually he will have, by necessity, to use a medical term. How will a patient be able to understand information when the language used is full of foreign terms?

Therefore a new problem is added to the current problems of informed consent. In such a situation, it is very difficult indeed for a Turkish physician to fulfil his ethical responsibilities. I think a similar problem can be encountered in many other countries.

References

Veatch RM. Cross cultural perspectives in medical ethics: readings.
 Boston: Jones and Bartlett Publishers, 1989: 96-7.

DR ERDEM AYDIN

Akdeniz University Medical Faculty,
Department of Medical Ethics
and History,
Antalya, Turkey